

ISSUE SLIP STABLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	69607	2/18/99
O.I.P.E. CLASSIFIER		12199	2/18/99
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	2/18/99
2	2/18/99
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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